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ADPA BULLETIN NO. 08-03

November 10, 2008

TO: Los Angeles County Drug/Medi-Cal
Contract Treatment Providers

FROM: Wayne K. Sugita, M.P.A., Acting Director
Alcohol and Drug Program Administration

SUBJECT: REVISED DRUG/MEDI-CAL RATES

This is to provide you with a copy of the State's **Proposed Drug/Medi-Cal Rates for Fiscal Year: 2008-09** (Attachment I). It is also to advise you that we are amending the rates in your current Fiscal Year 2008-09 Drug/Medi-Cal contracts.

Based on the revised State cap rates minus allowable County Administrative fees, the maximum contract rates will be as follows:

Service Function	Perinatal	Non-Perinatal
Narcotic Treatment Program		
Methadone - 365 days	\$12.16	\$11.30
Counseling: Individual	\$19.28	\$13.63
Counseling: Group	\$6.42	\$3.17
Outpatient Drug Free		
Individual	\$95.47	\$67.49
Group	\$57.26	\$28.30
Day Care Habilitative	\$74.61	\$61.16
Naltrexone	N/A	\$19.07
Perinatal Residential	\$85.69	N/A



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In addition, I have attached a list of estimated Drug/Medi-Cal slot costs for Fiscal Year 2008-09 (Attachment II).

If you have any questions or need additional information, please let me know or you may call Mike Romo at (626) 299-4127.

WKS:ko


Attachments

**c: Leo Busa
Dorothy de Leon
Mike Romo**

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**ADP BULLETIN**

Title Drug Medi-Cal Rates for Fiscal Year 2008-09 		Issue Date: October 1, 2008 Expiration Date: N/A	Issue No. 08-09
Deputy Director Approval dave neilsen Deputy Director Program Services Division	Function: <input type="checkbox"/> Information Management <input type="checkbox"/> Quality Assurance <input type="checkbox"/> Service Delivery <input checked="" type="checkbox"/> Fiscal <input type="checkbox"/> Administration	Supersedes Bulletin/ADP Letter No. 08-04	

PURPOSE

This bulletin transmits the approved Fiscal Year (FY) 2008-09 reimbursement rates for Drug Medi-Cal (DMC) services. The FY 2008-09 rates are effective July 1, 2008 through June 30, 2009.

DISCUSSION

Exhibit A includes the approved reimbursement rates for FY 2008-09, which reflect the Department of Alcohol and Drug Programs' (ADP) analysis of costs and units of service for the DMC treatment modalities. Each year ADP develops new reimbursement rates for DMC services. These rates are developed in accordance with Section 14021.6 of the Welfare and Institutions Code and Section 11758.42 of the Health and Safety Code.

Chapter 759, Statutes of 2008, eliminated the Uniform Statewide Monthly Reimbursement (USMR) rate for methadone dosing services within the Narcotic Treatment Program modality. All dosing services are to be billed based on the daily rate.

REFERENCES

Section 51516.1, Title 22, California Code of Regulations
 Section 14021.6, Welfare and Institutions Code
 Section 11758.42, Health and Safety Code
 AB 1279, Chapter 759, Statutes of 2008



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HISTORY

Section 51516.1 of Title 22, California Code of Regulations authorizes reimbursement rates for DMC substance abuse program services.

QUESTIONS/MAINTENANCE

Questions concerning the FY 2008-09 reimbursement rates can be directed to Anthony Ortiz at (916) 324-3348. The bulletin is also available on ADP's Web page at http://www.adp.ca.gov/ADPLTRS/bulletin_letter.shtml.

EXHIBIT

Exhibit A – Approved Drug Medi-Cal Rates for Fiscal Year 2008-09

DISTRIBUTION

County Alcohol and Drug Program Administrators
Directors Advisory Council
Drug Medi-Cal Certified Providers
Strategic Local Government Services, LLC

**FISCAL YEAR 2008-2009 DRUG MEDI-CAL ANNUAL SLOT COST
(ESTIMATED)**

NON-PERINATAL

1. NTP: Methadone: (dosing: \$11.30 a day X 365 days) + (counseling: \$13.63 per 10-minute increment X 20 increments per month X 12 months) = **\$7,395.70**
2. DCH: \$61.16 per visit X 3 visits per week X 52 weeks = **\$9,540.96**
3. Naltrexone: \$19.07 a day X 365 days = **\$6,960.55**
4. ODF: (12 individual sessions X \$67.49) + (92 group sessions X \$28.30) = **\$3,413.48**

PERINATAL

1. PNPT: Methadone: (dosing: \$12.16 a day X 365 days) + (counseling: \$19.28 per 10-minute increment X 20 increments per month X 12 months) = **\$9,065.60**
2. DCHP: \$74.61 a visit X 3 visits per week X 52 weeks = **\$11,639.16**
3. RPH: \$85.69 a day X 365 days = **\$31,276.85**
4. ODFP: (12 individual sessions X \$95.47) + (92 group sessions X \$57.26) = **\$6,413.56**

WKS:ko

Approved Drug Medi-Cal Rates For Fiscal Year 2008-09

Program Code: 20 (Alcohol and Drug Services)

Description	Service Function Code	Unit of Service (UOS)	FY 2008-09 UOS Rate
Narcotic Treatment Program (NTP) - Methadone	20, 21	Daily	\$12.44
NTP - Methadone - SACPA Clients	22		1.14 (*)
NTP - Individual Counseling (**)	26	One 10-minute	\$15.00
NTP - Individual Counseling - SACPA Clients (**)	27	Increment	1.37 (*)
NTP - Group Counseling (**)	28	One 10-minute	\$3.49
NTP - Group Counseling - SACPA Clients (**)	29	Increment	0.32 (*)
Day Care Rehabilitative (DCR)	30 - 38	Face-to-Face	\$67.96
DCR - SACPA Clients	39	Visit	
Naltrexone (NAL) (***)	50 - 58	Face-to-Face	\$21.19
NAL - SACPA Clients (***)	59	Visit	
Outpatient Drug Free (ODF) Individual Counseling	80 - 83	Face-to-Face Visit	\$74.99
ODF Individual Counseling - SACPA Clients	84	(Per Person)	
ODF Group Counseling	85 - 88	Face-to-Face Visit	\$31.45
ODF Group Counseling - SACPA Clients	89	(Per Person)	

Program Code: 25 (Perinatal Services)

Description	Service Function Code	Unit of Service (UOS)	FY 2008-09 UOS Rate
Narcotic Treatment Program (NTP) - Methadone	20, 21	Daily	\$13.38
NTP - Methadone - SACPA Clients	22		1.22 (*)
NTP - Individual Counseling (**)	26	One 10-minute	\$21.22
NTP - Individual Counseling - SACPA Clients (**)	27	Increment	1.94 (*)
NTP - Group Counseling (**)	28	One 10-minute	\$7.07
NTP - Group Counseling - SACPA Clients (**)	29	Increment	.65 (*)
Day Care Rehabilitative (DCR)	30 - 38	Face-to-Face	\$82.90
DCR - SACPA Clients	39	Visit	
Perinatal Residential (RES)	40 - 48	Daily	\$95.21
RES - SACPA Clients	49		
Outpatient Drug Free (ODF) Individual Counseling	80 - 83	Face-to-Face Visit	\$106.08
ODF Individual Counseling - SACPA Clients	84	(Per Person)	
ODF Group Counseling	85 - 88	Face-to-Face Visit	\$63.62
ODF Group Counseling - SACPA Clients	89	(Per Person)	

* Denotes the administrative costs which are incorporated within the rate.

** ADP shall reimburse NTP providers for up to 200 minutes of counseling per calendar month, per beneficiary, under Methadone service only. Counseling shall be individual and/or group.

***Since FY 2002-03 Naltrexone has been frozen at the FY 1999-2000 approved rate. No more recent cost report data has been submitted.